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# **Suicide Awareness In Kentucky**

Baseline Results of a Statewide Survey

*Study conducted by the  
Kentucky Suicide Prevention Planning Group*

*October 2003*

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# INTRODUCTION

## Context and Purpose of the Survey

**"Even one death by suicide is one death too many."**

*Department of Health & Human Services  
Secretary Tommy G. Thompson*

On average, suicide claims the lives of almost 500 Kentuckians every year. The impact of suicide does not stop with the lost lives. For every suicide death, it is estimated that at least six individuals are profoundly affected for the rest of their lives. These deaths and their effects are even more tragic as suicide is a preventable public health issue. With a suicide rate higher than the national average, prevention of suicide remains an ongoing challenge for the citizens of Kentucky.

In response to the Surgeon General's Call to Action to Prevent Suicide released in 1999, the Division of Mental Health assigned staff to research the issue. An invitation was extended to multiple community stakeholders to collaboratively develop a statewide suicide prevention plan. Using the eleven goals and their corresponding objectives from the National Strategy for Suicide Prevention as a framework, these invested and active stakeholders have proposed a strategy to reduce the rate of suicide within Kentucky. Serving as a catalyst for social change, the strategy focuses on:

- Awareness – through increased awareness, more people will be able to assist at-risk persons; more at-risk persons will be able to seek help; and policy makers will have needed information to modify policies and allocate resources toward suicide prevention efforts
- Intervention – through increased intervention, more communities will be able to coordinate services; those services will be more easily accessible to those at-risk; suicide assessment trainings for all populations will be established; and technical assistance for those trainings will be available
- Methodology – through improved methodology, research on suicide prevention will be promoted and supported; state statistics will be gathered and available in an annual review report; a process to evaluate the effectiveness of individual prevention programs as well as that of the Kentucky Suicide Prevention Plan will be developed.

In keeping with the Awareness and Methodology goals, the purpose of the survey was to determine the status of public awareness in Kentucky about the problem of suicide. Results from the survey will be used to establish a baseline measure of public awareness. A post-test survey will be administered in Spring 2004 to measure the impact of the efforts of the Kentucky Suicide Prevention Planning Group (KSPPG) to increase public awareness.

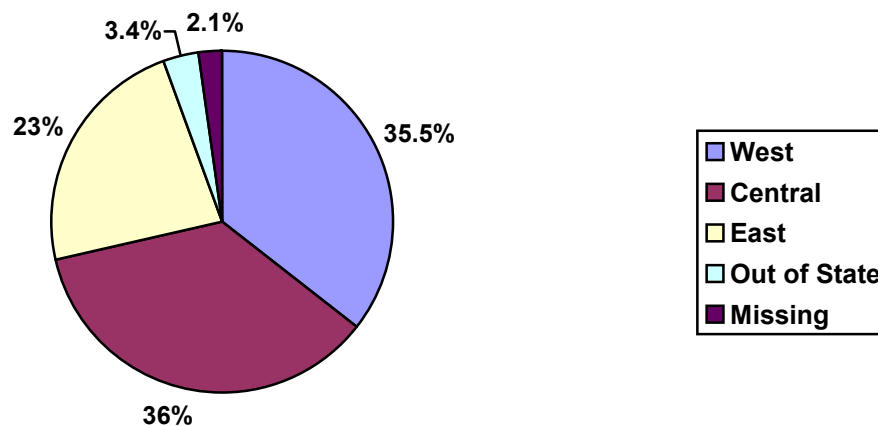
# METHOD

## Conduct of the Survey

### Participants and Procedures

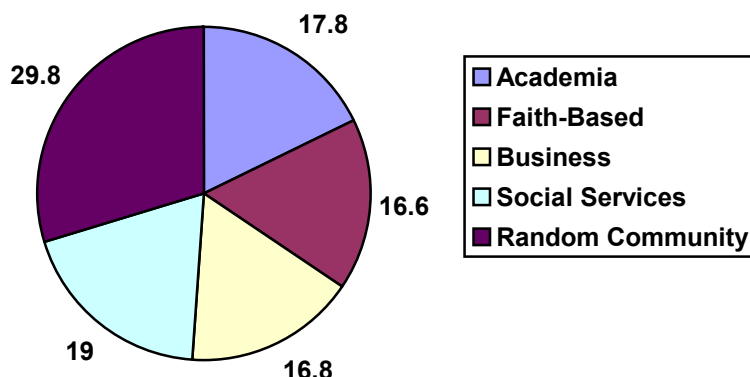
The population of interest for the present survey was residents of Kentucky. In an effort to limit costs associated with distribution, it was determined that members of the KSPPG would take responsibility for distribution of the surveys. Further, due to the extensive resources required to sample the total population of interest, a sampling procedure based on geographic regions of the state and target populations was developed to facilitate a balanced distribution of respondents. To that end, the state was divided into West, Central, and East geographic regions. In addition, surveys were distributed to the following target populations: (1) Academia, including high school and college students and educators; (2) Faith-Based Organizations, including members of faith-based congregations, ministers, or other employees of faith-based entities; (3) Business, including employees of businesses, corporate staff, or members of civic organizations; (4) Social Services, including employees of social service entities and members of community outreach organizations, such as Meals on Wheels or Hospice; and (5) Random Community Members, in which members invited individuals to complete the survey in various community settings, such as sports events, retail locations, neighborhood.

**Percentage of Responses by Area of State**



\*Out of State responses were from individuals residing in Tennessee (n=7), Virginia (n=1), Ohio (n=2), Indiana (n=10), and North Dakota (n=1)

### Percentage of Responses by Target Group



KSPPG members distributed surveys between April 25<sup>th</sup> and May 12<sup>th</sup>, 2003. Respondents were informed that the purpose of the survey was to determine what the citizens of Kentucky know about suicide. Completion of the survey was voluntary, and no identifying information was requested. Verbal consent was obtained from caregivers of youth less than age 18 who completed the survey. Approximately 1,000 surveys were distributed, and 625 completed surveys were returned for data entry, resulting in a 62.5% response rate.

#### Instrumentation

The Evaluation Committee of the KSPPG undertook development of the suicide awareness survey. To increase the likelihood of response, it was determined that the survey would be brief and simple to complete. To that end, the survey contained 6 questions to which the respondent answered either "yes", "no", or "unsure" (Please see Appendix for a copy of the survey). In addition, demographic information was requested, including gender, race/ethnicity, age, county and state of residence, and occupation. Surveys were printed on half-sheets of colored, cardstock paper.

#### Data Entry & Analysis

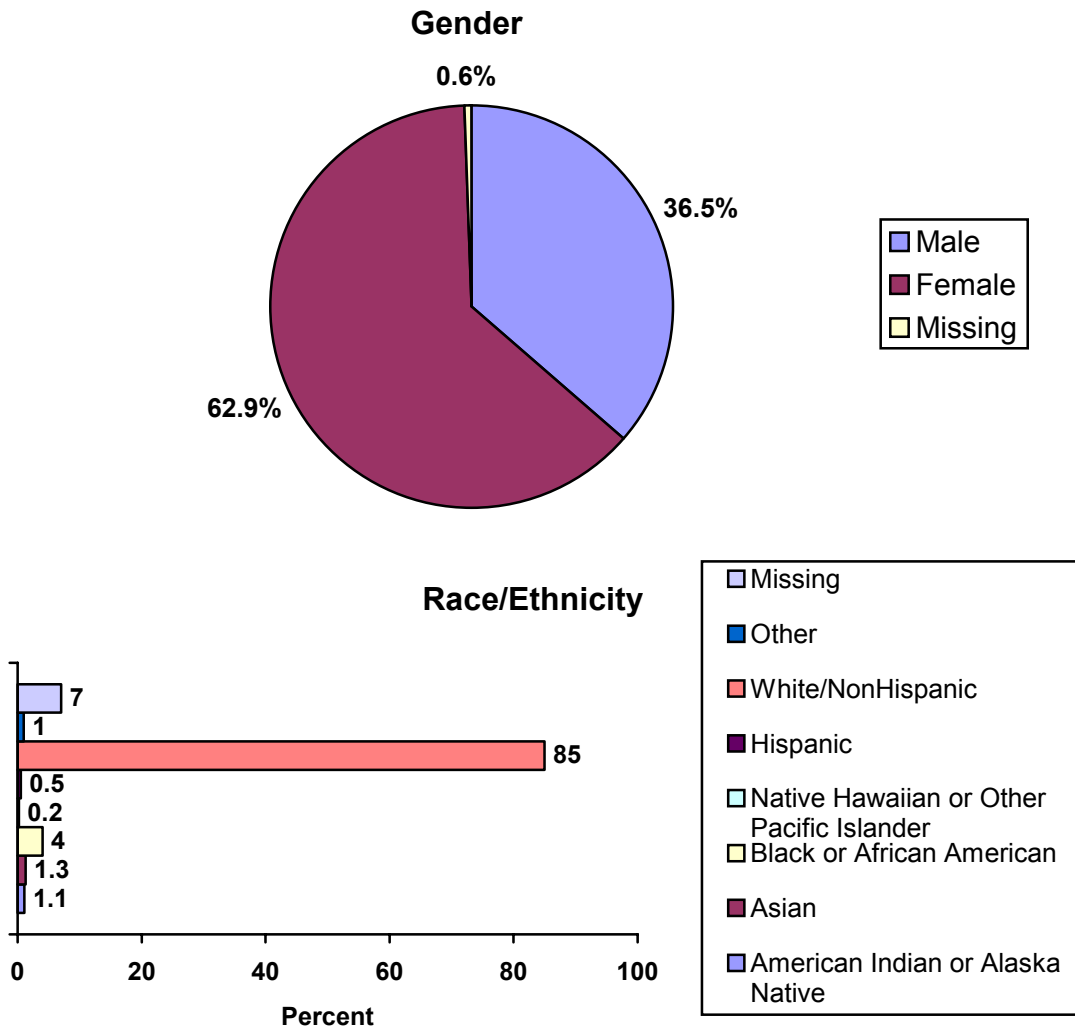
Two members of the Kentucky Suicide Prevention Planning Group entered survey responses into a database. Descriptive statistics were computed using SPSS 10.1. Due to missing data, sample size varied by analysis.

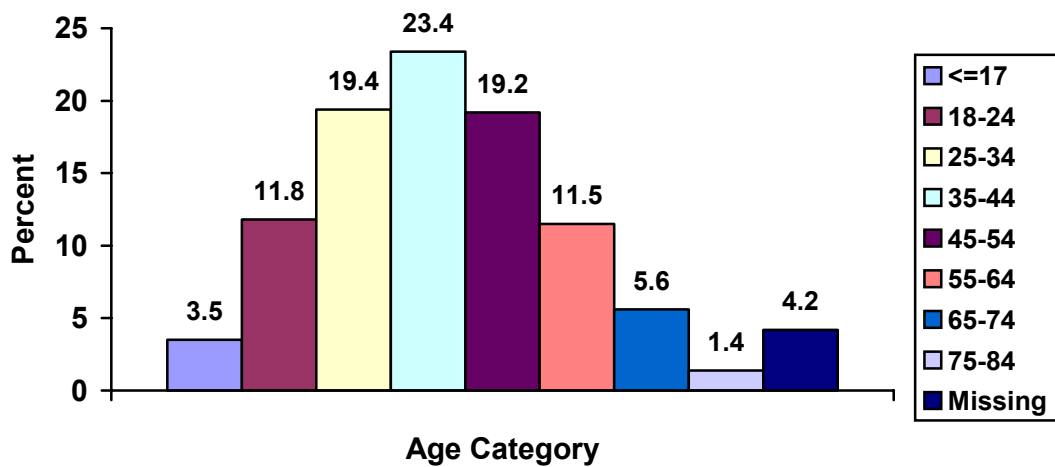
# RESULTS

## Survey Findings

### Description of Respondents

Most respondents were female (63%) and ranged in age from 10 to 84 years, with an average of 40.8 years (SD=14.9, n=599). Reflecting the racial composition of Kentucky, respondents were primarily White/NonHispanic (85%). The “Other” race category was comprised of those indicating their race/ethnicity as multi-racial.





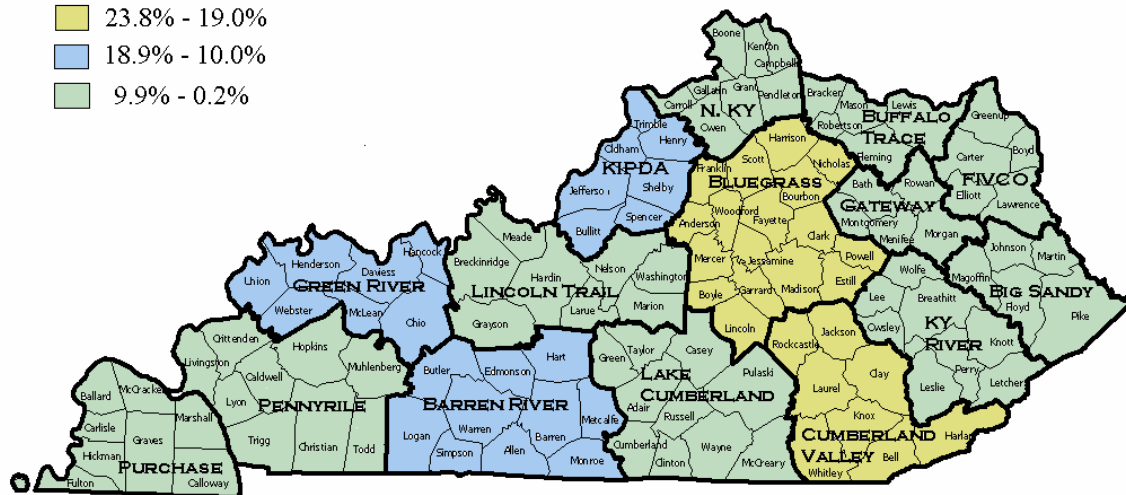
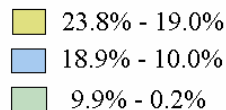
With respect to occupation, human service personnel (15%), students (11.2%), and clerical/administrative workers (10.7) were the most commonly reported.

Occupation	Frequency	Percent
Human Services	94	15.0
Student	70	11.2
Clerical/Administrative	67	10.7
Education	55	8.8
Technical	47	7.5
Manual Labor	41	6.6
Faith Based	41	6.6
Professional	39	6.2
Retail	37	5.9
Retired	34	5.4
Medical	28	4.5
Homemaker	18	2.9
Self Employed	12	1.9
Unemployed	11	1.8
Missing	31	5.0

Respondents were asked to report their county of residence. This information was used to determine the percentage of respondents from the Area Development Districts. Most respondents resided in either the Bluegrass (23.8%), Cumberland Valley (19%), or Green River (18.1%) district.

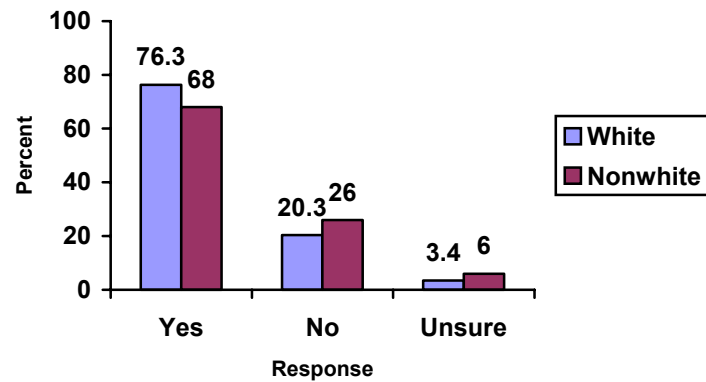
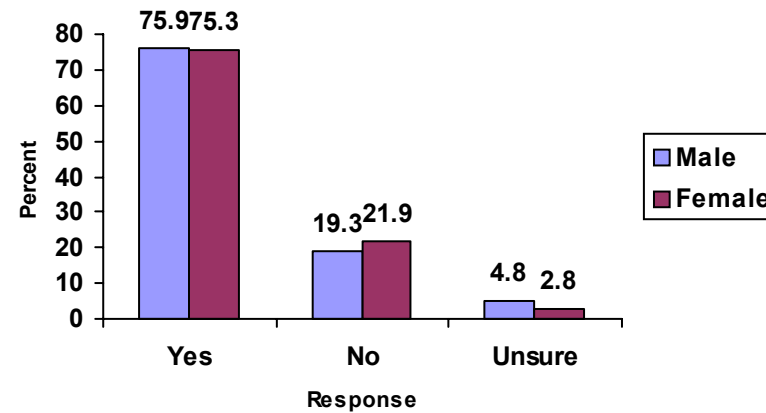
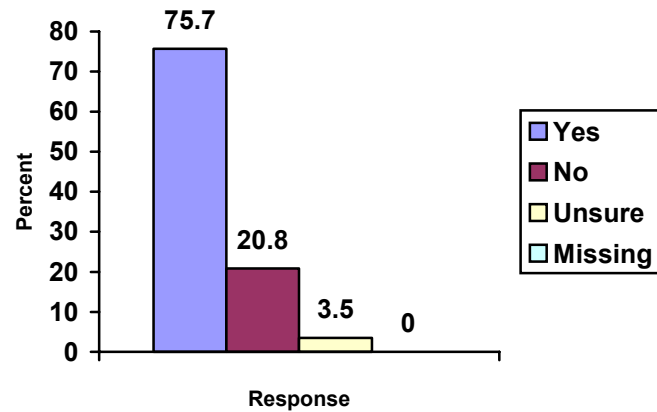
Area Development District	Frequency	Percent
Bluegrass	149	23.8
Cumberland Valley	119	19.0
Green River	113	18.1
KIPDA	71	11.4
Barren River	67	10.7
Lincoln Trail	60	9.6
Northern Kentucky	5	0.8
Purchase	2	0.3
Kentucky River	2	0.3
Big Sandy	1	0.2
Gateway	1	0.2
Lake Cumberland	1	0.2
Out of State	21	3.4
Missing	13	2.1

#### Percentage of Respondents



## Survey Item Responses

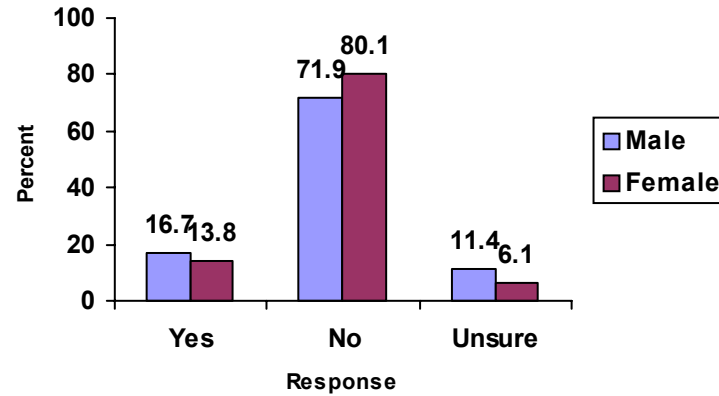
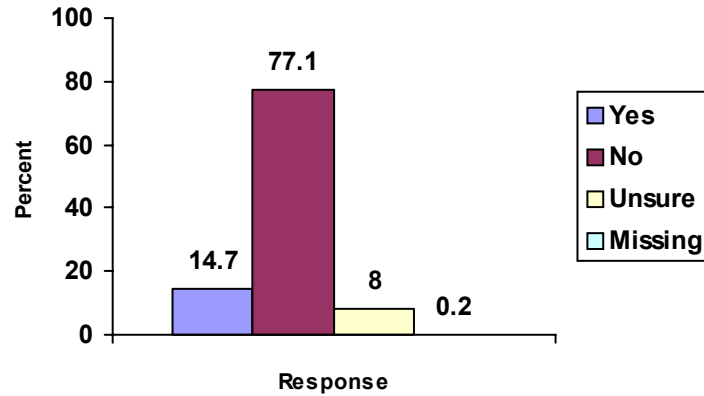
Question 1: I know someone who has attempted or committed suicide.



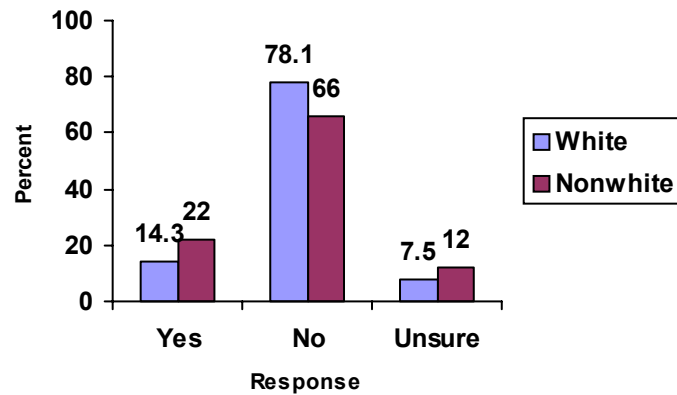
Age Category	Percent (%) Responding within Age Category		
	Yes	No	Unsure
≤ 17 years of age	54.5	27.3	18.2
18 – 24	73.0	21.6	5.4
25 – 34	75.2	21.5	3.3
35 – 44	74.7	21.9	3.4
45 – 54	81.7	18.3	---
55 – 64	83.3	13.9	2.8
65 – 74	71.4	25.7	2.9
75 – 84	33.3	44.4	22.2



Question 2: Alcohol, drugs, and/or major depression are usually not factors in suicide attempts.

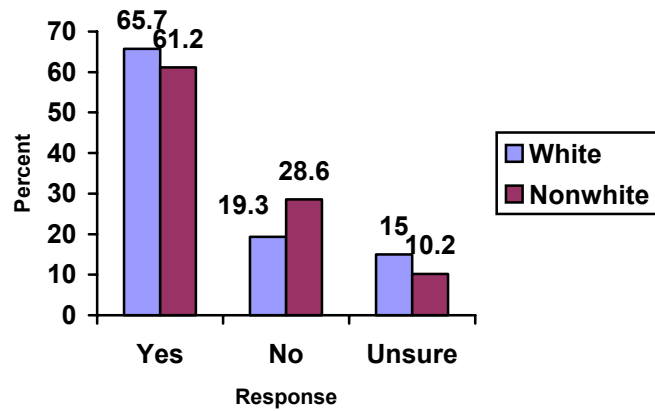
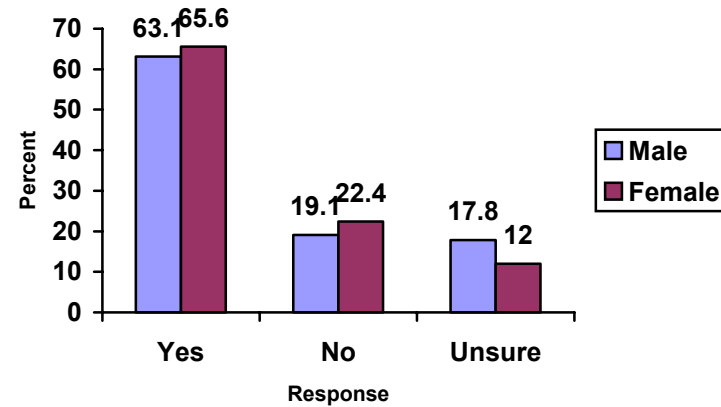
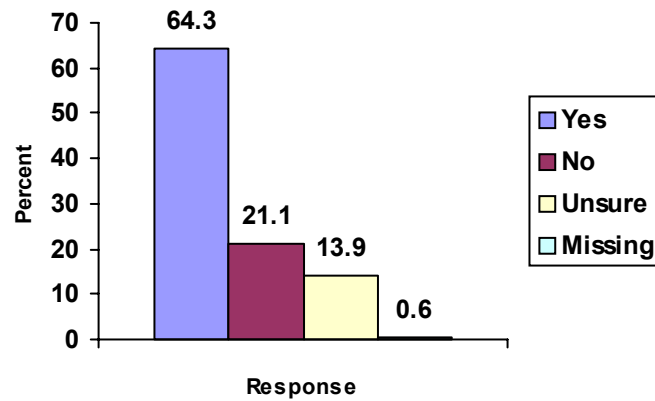


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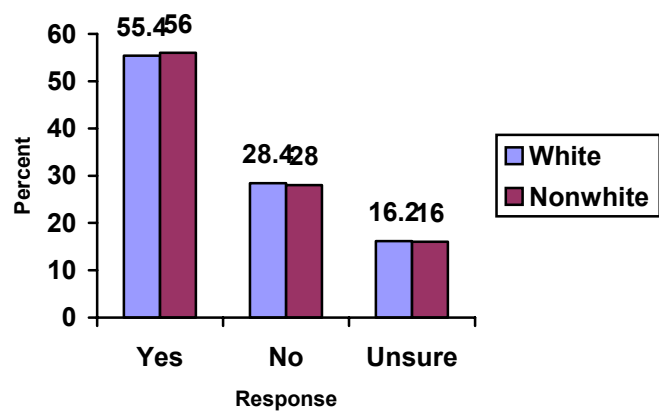
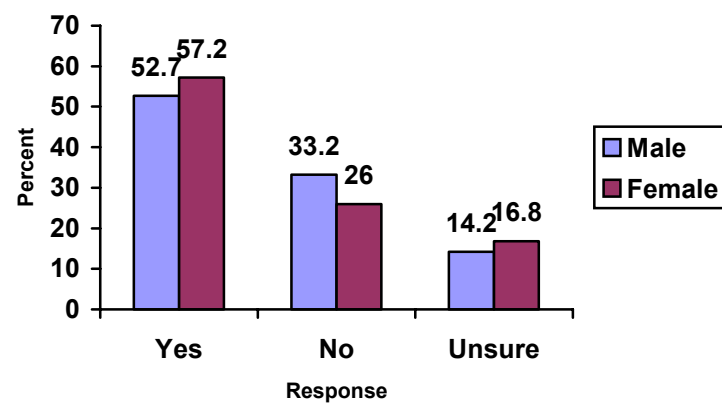
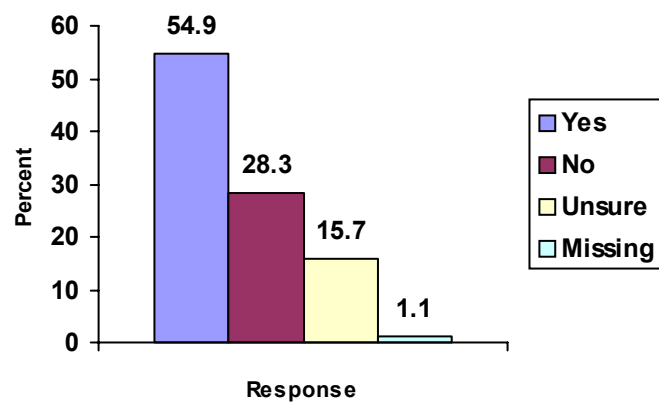
Age Category	Percent (%) Responding within Age Category		
	Yes	No	Unsure
< 17 years of age	4.5	86.4	9.1
18 – 24	18.9	70.3	10.8
25 – 34	14.0	79.3	6.6
35 – 44	7.5	82.2	10.3
45 – 54	15.8	78.3	5.8
55 – 64	19.4	73.6	6.9
65 - 74	22.9	68.6	8.6
75 - 84	22.2	55.6	22.2

Question 3: Most people who kill themselves usually show some sign of their suicide thoughts.



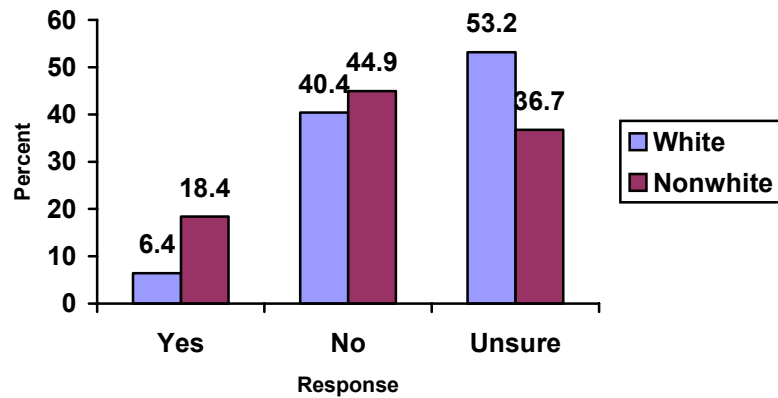
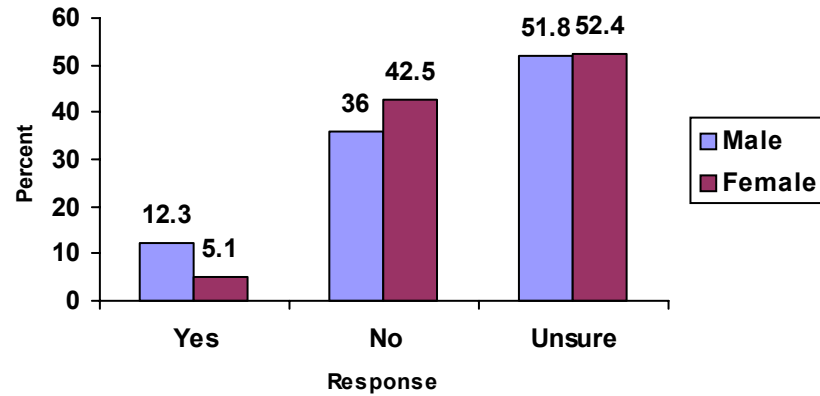
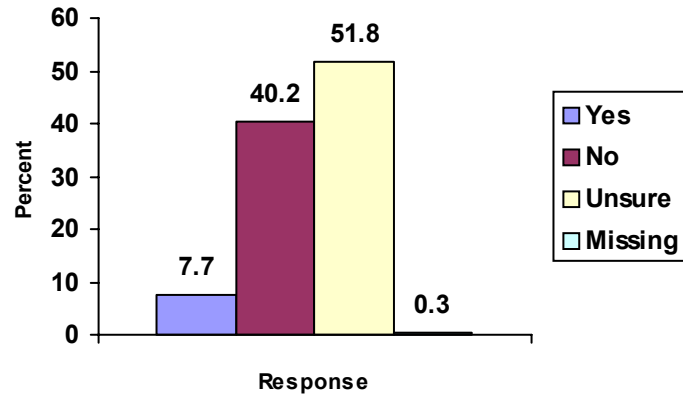
Age Category	Percent (%) Responding within Age Category		
	Yes	No	Unsure
≤ 17 years of age	59.1	18.2	22.7
18 – 24	65.8	20.5	13.7
25 – 34	63.3	22.5	14.2
35 – 44	65.8	21.9	12.3
45 – 54	67.2	20.2	12.6
55 – 64	70.8	18.1	11.1
65 – 74	55.9	23.5	20.6
75 – 84	44.4	33.3	22.2

Question 4: Normal people think about killing themselves.



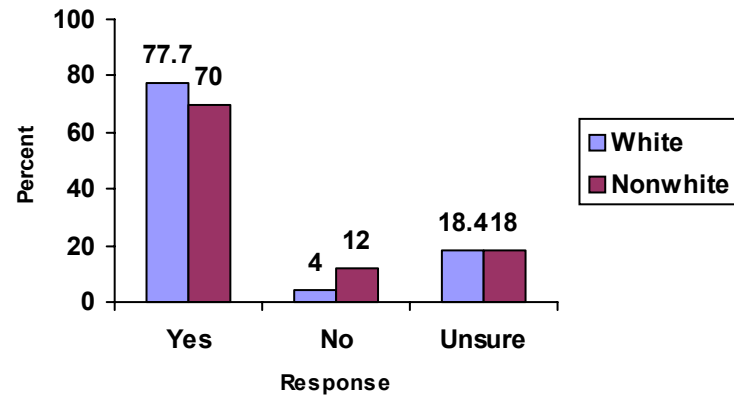
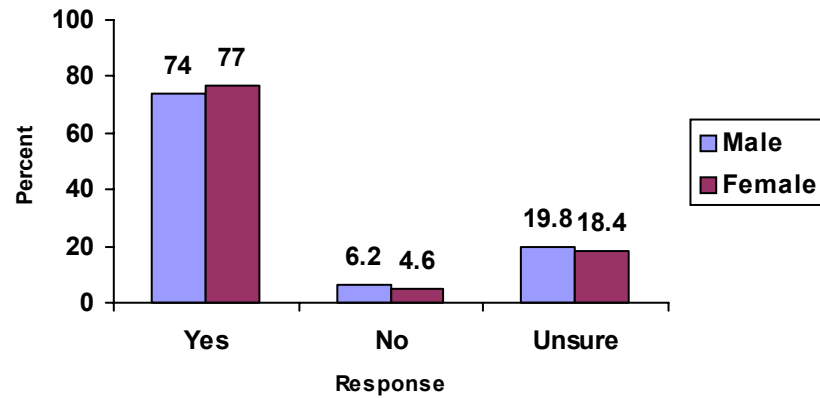
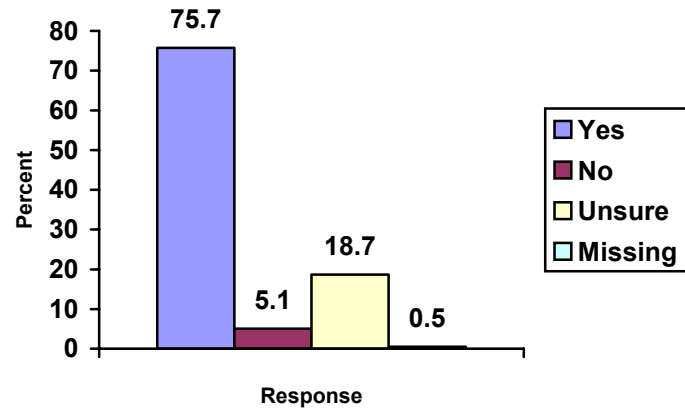
Age Category	Percent (%) Responding within Age Category		
	Yes	No	Unsure
< 17 years of age	54.5	9.1	36.4
18 – 24	58.1	18.9	23.0
25 – 34	61.7	25.0	13.3
35 – 44	57.6	28.5	13.9
45 – 54	57.1	31.9	10.9
55 – 64	51.4	34.3	14.3
65 - 74	48.6	40.0	11.4
75 - 84	11.1	44.4	44.4

Question 5: The rate of suicide deaths in Kentucky is much lower than most other states.



Age Category	Percent (%) Responding within Age Category		
	Yes	No	Unsure
≤ 17 years of age	4.5	36.4	59.1
18 – 24	2.7	31.1	66.2
25 – 34	10.7	47.1	42.1
35 – 44	6.8	41.1	52.1
45 – 54	2.5	47.1	50.4
55 – 64	13.9	38.9	47.2
65 – 74	14.7	26.5	58.8
75 – 84	11.1	22.2	66.7

Question 6: Suicide is preventable.



Age Category	Percent (%) Responding within Age Category		
	Yes	No	Unsure
≤ 17 years of age	90.9	---	9.1
18 – 24	81.1	5.4	13.5
25 – 34	82.5	6.7	10.8
35 – 44	75.9	8.3	15.9
45 – 54	69.2	3.3	27.5
55 – 64	83.1	4.2	12.7
65 – 74	65.7	---	34.3
75 – 84	44.4	---	55.6

# DISCUSSION

## Summary of Results

With a suicide rate higher than the national average, prevention of suicide remains an ongoing challenge for the citizens of Kentucky. Through increased awareness, more people will be able to assist in efforts to prevent suicide. To that end, the KSPPG conducted a statewide survey to assess the level of awareness about suicide among the citizens of the state. A total of 625 completed surveys were received and analyzed. The obtained sample of responses was fairly well distributed across the Western, Central, and Eastern portions of the state. Most resided in either the Bluegrass, Cumberland Valley, or Green River district. Females were over-represented in the sample as compared to the general state population. Blacks and Hispanics were slightly under-represented, and Asians and American Indians were slightly over-represented in the sample. The average age of 41 is similar to the median age of 36 for residents of Kentucky. Human service personnel, students, and clerical/administrative workers were the occupations most commonly reported by respondents.

Approximately three out of four survey respondents stated that they knew someone who had attempted or committed suicide. However, it is not known whether these responses refer to someone known personally to the respondent or someone heard about via the media or another source. Whites were slightly more likely than Nonwhites to report knowing someone who had attempted or committed suicide. There were no differences in gender. Those in the 45 to 64 age categories had the highest percentage reporting knowing someone who had attempted or committed suicide, while those in the 75-84 age category were the least likely. About  $\frac{3}{4}$  of those in the 18-24, 25-34, and 35-44 age groups reported knowing someone who had attempted or committed suicide. Of those indicating that they knew someone who had attempted or committed suicide, about 37% were from the Western part of the state, 36% were from the Central portion of the state, and about 23% were from the Eastern side of the state. About 3.2% were residents of another state.

Alcohol, drugs, and/or major depression are strongly correlated to suicidal attempts and completions. About 77% of those surveyed were in agreement with this statement. Females were slightly more likely than males to agree with this statement. Over 10% of males indicated uncertainty about the relationship. Whites were more likely than nonwhites to be knowledgeable of the association between suicide and substance use and depression. About 12% of nonwhites stated their uncertainty with this relationship. Few differences in responses among age categories were observed.

Research suggests that most who commit suicide will exhibit warning signs of their intentions. Approximately 3 in 5 persons surveyed indicated their agreement that most people who commit suicide show warning signs. About 14% were unsure of this, and about 21% did not believe that warning signs were evidenced. No large differences were noted between males and females with respect to this statement; however, males were slightly more likely to report being unsure of this. Nonwhites were more likely than whites to be

unaware of warning signs. With respect to age categories, those 17 or younger and older than 65 were the least likely to be aware that warning signs are often displayed.

Most people think about killing themselves at some point in their life. Slightly over half (55%) of those surveyed agreed that thoughts of suicide are common. The others either disagreed or were unsure. Responses did not differ greatly with respect to gender or age. Those in the 75 - 84 age category were the least likely to agree that most people think about killing themselves at some point in their life.

The rate of suicide deaths in Kentucky is higher than the national average. However, the majority of those surveyed (52%) were not aware of this fact. It appears that only about 40% of the respondents were aware of the extent of the problem in our state. Responses were similar across gender and age categories. However, whites were more likely to state their uncertainty about the extent of the problem, while nonwhites were more likely to indicate a belief that the suicide rate in Kentucky is much lower than other states.

Suicide is preventable. Fortunately, it appears that over three-fourths of those surveyed agreed with this statement. Almost 20% were unsure. Open-ended comments indicated that some respondents felt that if someone really wanted to commit suicide that he/she would do it, despite best attempts at prevention. Responses were similar across gender and race categories. Over half of those in the 75 - 84 age category were unsure as to the preventive nature of suicide.

Given the results of this baseline survey, it is evident that efforts to increase Kentucky's awareness of the problem of suicide are needed. Through increased awareness, more people will be able to assist at-risk persons; more at-risk persons will be able to seek help; and policy makers will have needed information to modify policies and allocate resources toward suicide prevention efforts.

# APPENDIX

## **We Need Your Help!!!**

The following survey is being conducted to see what you know about suicide.

Please answer the following questions by checking the appropriate boxes.

- Gender:      ☐ Male              ☐ Female  
Race:        ☐ American Indian or Alaska Native  
              ☐ Asian  
              ☐ Black or African American  
              ☐ Hispanic  
              ☐ Native Hawaiian or Other Pacific Islander  
              ☐ White/Non-Hispanic  
              ☐ Other \_\_\_\_\_

Age: \_\_\_\_\_ (in years)

County of Residence: \_\_\_\_\_

State of Residence: \_\_\_\_\_

Profession: \_\_\_\_\_

<b>Do you agree with the following statements?</b>	<b>Yes</b>	<b>No</b>	<b>Unsure</b>
1. I know someone who has attempted or committed suicide.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Alcohol, drugs, and/or major depression are usually not factors in suicide attempts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Most people who kill themselves usually show some sign of their suicidal thoughts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Normal people think about killing themselves.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The rate of suicide deaths in Kentucky is much lower than most other states.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Suicide is preventable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



